PAGE 1 / 20

Image# 13964594361

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office U	se Only	
1.	NAME OF COMMITTEE (in full)	TYPE OR F	PRINT ▼		mple: If typir r the lines.	ng, type	12FE4	M5		
F	Rely on Your Beliefs Fu	ınd						1 1 1 1		1
_										
AD	DRESS (number and street)	209 Penn	sylvania Aver	nue, SE						
r	Check if different									
ŀ	than previously reported. (ACC)	Washing	ton				DC	20003	3	
2.	FEC IDENTIFICATION NUI	MBER ▼		CITY 🛦		5	STATE A		ZIP COI	DE 🛦
	C C00344648		3	3. IS THIS REPORT		NEW N) OR	×	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b) Mon Rep	ort	Feb 20 (M2)	1	May 20 (M5)	×	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	Due		Mar 20 (M3)		Jun 20 (M6)		Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15			Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly Report (Q1) (c)	12-Day	П	Primary (12P	r)	Gene	eral (12G)	П	Runoff (12R)
	July 15 Quarterly Report (Q2	2)	PRE-Election			_	1			, ,
	October 15	,	Report for th	ie:	Convention (120)	Spec	ial (12S)		
	Quarterly Report (Q3 January 31 Year-End Report (YE		E	ection on	M M /	D D /	Y Y Y	Y	in the State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day POST-Election		General (300	G)	Runo	off (30R)		Special (30S)
	Termination Report (TER)		Report for th	le.	M = M /	D D /	Y = Y = Y	Y	in the	
	(ILII)		Е	ection on					State of	
5.	Covering Period 07	/ 01		13	through	M M M 07_	/ D D	20	13	
l c	ertify that I have examined this	Report a	nd to the be	st of my know	wledge and b	pelief it is tru	e, correct	and comple	te.	
	pe or Print Name of Treasurer	Paul Kilg								
Sig	nature of Treasurer Paul K	Tilgore			[Electronically	; Filed] D	ate 0	9 / 10	D /	2013
NΩ	TE: Submission of false, erroned	ous, or inco	omplete inform	nation may su	biect the pers	son signing th	is Report	to the penalti	es of 2 l	J.S.C. §437a
	Office Office	1.15, 51 11100		I I I I I I I I I I I I I I I I I I I	,oo: alo pole	2.1. 0.9.11.19 111				
	Use Only								FOR Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Rely on Your Beliefs Fund 07 2013 07 2013 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 253973.48 January 1, 2013 (b) Cash on Hand at 267956.19 Beginning of Reporting Period..... 335050.42 37500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 305456.19 589023.90 6(a) and 6(c) for Column B)..... 45484.63 329052.34 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 259971.56 259971.56 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Rely on	Your	Beliefs	Fund
---------	------	----------------	------

Covering the Period: From: 07	01 2013 To	: 07 31 2013	
I. Receipts	COLUMN B Calendar Year-to-Date		
(i) Itemized (use Schedule A)	8000.00	42500.00	
(ii) Unitemized	0.00	0.00	
Lines 11(a)(i) and (ii)▶	8000.00	42500.00	
Political Party Committees	0.00	0.00	
Other Political Committees (such as PACs)	29500.00	291000.00	
Total Contributions (add Lines			
Totals to Line 33, page 5)▶	37500.00	333500.00	
	0.00	0.00	
Loans Received	0.00	0.00	
a Demonstrate Descript	0.00	0.00	
sets To Operating Expenditures	0.00	0.00	
·	0.00	1550.42	
	0.00	1550.42	
	0.00	0.00	
	0.00	0.00	
(from Schedule H3)	0.00	0.00	
Levin Funds (from Schedule H5)	0.00	0.00	
Total Transfers (add 18(a) and 18(b))	0.00	0.00	
	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Intributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

Total This Period	COLUMN B Calendar Year-to-Date
	Calonial Tour to Date
0.00	0.00
0.00	0.00
25484.63	225552.34
25484.63	225552.34
0.00	0.00
20000.00	100000.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	3500.00
0.00	0.00
0.00	0.00
0.00	3500.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
45484.63	329052.34
45484.63	329052.34
	0.00 0.00 25484.63 25484.63 0.00 20000.00 0.00 0.00 0.00 0.00 0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	37500.00	333500.00	
4. Total Contribution Refunds (from Line 28(d))	0.00	3500.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37500.00	330000.00	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	25484.63	225552.34	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1550.42	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	25484.63	224001.92	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund		
Stanton Park Group Receipt For: Primary General Other (specify) ▼	State Zip Code VA 22207-4202 C Decupation Principal Aggregate Year-to-Date ▼ 500.00	Date of Receipt 07 22 2013 Transaction ID: 30809.C1602 Amount of Each Receipt this Period 500.00 Receipt
Dupre Logistics, LLC	State Zip Code LA 70508-3851 C Description DEO Aggregate Year-to-Date ▼ 1000.00	Date of Receipt O7 22 2013 Transaction ID: 30809.C1599 Amount of Each Receipt this Period 1000.00 Receipt
American Trucking Assoc	State Zip Code VA 22101-1538 C Description President Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 07 22 2013 Transaction ID: 30809.C1603 Amount of Each Receipt this Period 1000.00 Receipt
SUBTOTAL of Receipts This Page (optional)	>	2500.00
TOTAL This Period (last page this line number only	v)	

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

				MBER	:	PAGE	7	OF	2	20
Use separate schedule(s) for each category of the	`.	k only	or	ne)			l			
Detailed Summary Page	X	11a		11b		11c	12	: . [<u> </u>	
		13		114		15	16	j	1.	1 /

NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund		
Full Name (Last, First, Middle Initial) Gregg Hartley Mailing Address, 957 Octoo Page		Date of Receipt
Mailing Address 857 Cedar Dr		07 22 2013
City	State Zip Code	Transaction ID: 30809.C1604
Deale	MD 20751-9613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	Receipt
Cassidy & Associates	Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	2500.00	
Full Name (Last, First, Middle Initial) Kevin Knight		Date of Receipt
Mailing Address 19154 N 107th St		07 22 2013
City	State Zip Code	Transaction ID: 30809.C1600
Scottsdale	AZ 85255-6246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1000.00
Name of Employer	Occupation	Receipt
nformation Requested	Information Requested	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Gary Salisbury	1	Date of Receipt
Mailing Address 151 Hempstead 19		07 22 2013
City	State Zip Code	Transaction ID: 30809.C1609
Hope	AR 71801-9514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	Receipt
Fikes Truck Line	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
	1	
JBTOTAL of Receipts This Page (optional)		4500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

20

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund Full Name (Last, First, Middle Initial) Steven Williams Date of Receipt Mailing Address PO Box 15428 2013 City Zip Code State Transaction ID: 30809.C1601 AR Little Rock 72231-5428 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Occupation Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 8000.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 9 OF 20 (check only one)
I LIVIIZED TILOLIF 13	Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and Staten or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund		
Full Name (Last, First, Middle Initial) American Urological Association PAC Mailing Address PO Box 15441		Date of Receipt
,	State Zip Code DC 20003-0441	07 12 2013 Transaction ID : 30809.C1594
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 3000.00
Name of Employer Oc	cupation	— Receipt
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 3000.00	
Full Name (Last, First, Middle Initial) Anheuser-Busch PAC		Date of Receipt
Mailing Address 1401 I St NW Ste 200 City	State Zip Code	07 12 2013
	DC 20005-6549	Transaction ID : 30809.C1597 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C00034488	5000.00
Name of Employer Oc	cupation	Receipt
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) C. DirecTV PAC		Date of Receipt
Mailing Address 901 F St NW Ste 600		07 22 2013
,	State Zip Code DC 20004-1429	Transaction ID : 30809.C1608 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C00331991	2500.00
Name of Employer Oc	cupation	Receipt
Receipt For: Primary General Other (specify) ▼	gregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional)	•	10500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 20 (check only one)
	nd Statements may not be sold or used by any pent the name and address of any political committee	
Full Name (Last, First, Middle Initial) General Electric PAC Mailing Address 1299 Pennsylvania Ave N City Washington	State Zip Code DC 20004-2400	Date of Receipt 07
FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	C C00024869 Occupation Aggregate Year-to-Date ▼ 1000.00	Receipt
Full Name (Last, First, Middle Initial) Intl Council of Shopping Centers Mailing Address 555 12th St NW Ste 660 City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code DC 20004-1241 C C00217638 Occupation Aggregate Year-to-Date ▼	Date of Receipt 07 12 2013 Transaction ID: 30809.C1595 Amount of Each Receipt this Period 2000.00 Receipt
Full Name (Last, First, Middle Initial) National Cable & Telecommun Mailing Address 25 Massachusetts Ave N' City Washington FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)		Date of Receipt 07 22 2013 Transaction ID: 30809.C1607 Amount of Each Receipt this Period 5000.00 Receipt
SUBTOTAL of Receipts This Page (optional	l)	8000.00
TOTAL This Period (last page this line num	ber only)	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 20					
ΙT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
			Detailed Summary Page	11a 11b X 11c 12					
Δ,	y information copied from such Reports and Sta	atomonto m	y not be cold or used by any n						
	for commercial purposes, other than using the								
	NAME OF COMMITTEE (In Full)								
$ \rangle$	Rely on Your Beliefs Fund								
Α.	Full Name (Last, First, Middle Initial) National Tank Truck Carriers PAC			Date of Receipt					
	Mailing Address 950 N Glebe Rd Ste 520			07 22 2013					
	City	State	Zip Code	Transaction ID : 30809.C1605					
	Arlington	VA	22203-4183	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0188011	1000.00					
	Name of Employer	Occupation		Receipt					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		1000.00	1					
	Other (specify) ▼		1000.00						
В.	Full Name (Last, First, Middle Initial) United Health Group PAC			Date of Receipt					
	Mailing Address 701 Pennsylvania Ave NW Ste	M = M / D = D / Y = Y = Y = Y							
	City	07 12 2013 Transaction ID : 30809.C1596							
	Washington	State DC	Zip Code 20004-2641	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C cod	0400135	5000.00					
	·			Receipt					
	Name of Employer	Occupation		T.COO.P.					
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General	00 0		1					
	Other (specify) ▼		5000.00						
<u> </u>	Full Name (Last, First, Middle Initial) Verizon Wireless Good Govt Club			Date of Receipt					
	Mailing Address 1300 I St NW Ste 400			07 12 2013					
	City	State	Zip Code	Transaction ID : 30809.C1598					
	Washington	DC	20005-3314	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C co	0186288	5000.00					
	Name of Employer	Name of Employer Occupation							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General		5000.00	1					
	Other (specify) ▼		5000.00	1					
	UBTOTAL of Receipts This Page (optional)			11000.00					
\vdash	age (optional)								
Īτ	OTAL This Period (last nage this line number o	nly)		29500.00					

TOTAL This Period (last page this line number only).....

ľ

SCHEDULE B (FEC Form 3X)	Lloo congrete askedula/a	FOR LINE NUMBER: PAGE 12 OF 20					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 23 [23 24 25 26			
	Detailed Summary Page	27	28a 28b	28c 29 30b			
Any information copied from such Reports and Sta	ements may not be sold or use	d by any perso	on for the purpose of	soliciting contributions			
or for commercial purposes, other than using the n							
NAME OF COMMITTEE (In Full)							
Rely on Your Beliefs Fund							
Full Name (Last, First, Middle Initial)							
A. Roy Blunt			Date of Disbursen	nent			
Mailing Address PO Box 50100			07 18				
			01 10	2010			
City	State Zip Code		Transaction ID :	30809.E2630			
Springfield Purpose of Disbursement	MO 65805-0100						
See Below			Amount of Each D	Disbursement this Period			
Candidate Name		Category/		720.00			
000		Туре		730.00			
Office Sought: House Disburs Senate	ement For: Primary General		OFF DELOW				
President	Other (specify)		SEE BELOW				
State: District:							
Full Name (Last, First, Middle Initial)							
B. Williamsburg Colonial Houses			Date of Disbursen				
Mailing Address PO Box 1776			07 18				
City	State Zip Code VA 23187-1776		Transaction ID :	30809.E2631			
Williamsburg Purpose of Disbursement	VA 23187-1776						
PAC Lodging			Amount of Each D	Disbursement this Period			
Candidate Name		Category/		664.00			
Office Sought: House Disburs	ement For:	Туре		004.00			
Senate Dispurs	Primary General		[MEMO ITEM] MEMO: PAC LODG	SING			
President	Other (specify)		WILIVIO. FAC LODE	SilvO			
State: District:							
Full Name (Last, First, Middle Initial)			Data of District	aant			
C. GMD Technologies			Date of Disbursen				
Mailing Address PO Box 3663			07 18				
0.1							
City Jackson Hole	State Zip Code WY 83001-3663		Transaction ID :	30809.E2627			
Purpose of Disbursement	Purpose of Disbursement						
	PAC IT Services						
Candidate Name	Candidate Name Cate						
Office Sought: House Disburs	ement For:	Туре		100.00			
Senate	Primary General		PAC IT SERVICES	,			
President	Other (specify) ▼						
State: District:							
QUIDTOTAL (CD)				830.00			
SUBTOTAL of Disbursements This Page (optional)	·····		350.00			
TOTAL This Period (last page this line number on	ly)						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	PAGE 13 OF 2	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 23 28a 28b	24 25 2 28c 29 3
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund	o and address of any pointer			om oddir committee.
Full Name (Last, First, Middle Initial)			Data of Distance	
A. Professional Data Services, Inc.			Date of Disburseme	ent
Mailing Address 2470 Daniels Bridge Rd Ste 121			07 01	2013
,	State Zip Code		Transaction ID : 3	80708.E2606
Athens Purpose of Disbursement	GA 30606-6188			
PAC Compliance Consulting			Amount of Each Di	sbursement this Period
Candidate Name		Category/		1501.84
Office County		Туре		1301.04
President	Primary General Other (specify)		PAC COMPLIANCE	CONSULTING
State: District:				
Full Name (Last, First, Middle Initial) B. Professional Data Services, Inc.			Date of Disburseme	ent
Mailing Address 2470 Daniels Bridge Rd Ste 121			07 30	2013
Maining Address 2470 Daniels Blidge Rd Ste 121			07	2010
	State Zip Code		Transaction ID : 3	30809.E2632
Athens Purpose of Disbursement	GA 30606-6188			
PAC Compliance Consulting			Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		1504.34
	nent For: Primary General Other (specify)		PAC COMPLIANCE	CONSULTING
Full Name (Last, First, Middle Initial)				
C. Restaurant Associates			Date of Disburseme	ent
Mailing Address PO Box 91337			07 / D D D	2013
City S Chicago	State Zip Code IL 60693-1337		Transaction ID : 3	30809.E2610
Purpose of Disbursement PAC Meeting Expense				
Candidate Name		Category/	Amount of Each Di	sbursement this Period 630.00
Office Sought: House Disbursen	nent For:	Туре		
	Primary General Other (specify) ▼		PAC MEETING EXP	PENSE
ciaco. Diomot.				
SUBTOTAL of Disbursements This Page (optional)				3636.18
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 14 OF 20
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Rely on Your Beliefs Fund				
Full Name (Last, First, Middle Initial)				
Thompson Communications			Date of Disburs	ement
Mailing Address PO Box 5			07	12 2013
City	State Zip Code		Transaction II	D : 30809.E2612
Marshfield	MO 65706-0005		Transaction it	D . 30009.E2012
Purpose of Disbursement See Below			Amount of Each	n Disbursement this Period
Candidate Name		Category/		12007.00
	_	Туре		12897.89
Office Sought: House Disburse Senate	ment For: Primary General			
President	Primary General Other (specify) ▼		SEE BELOW	
State: District:	Cirici (apoony)			
Full Name (Last, First, Middle Initial)				
3. Thompson Communications			Date of Disburs	
Mailing Address PO Box 5				12 2013
City	State Zip Code		Transaction II	D : 30809.E2622
Marshfield Purpose of Disbursement	MO 65706-0005			
PAC Payroll Expense			Amount of Each	Disbursement this Period
Candidate Name		Category/		700.07
		Type		730.07
	ment For:		[MEMO ITEM]	
Senate President	Primary General Other (specify) ▼		MEMO: PAC PA	YROLL EXPENSE
State: District:	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. Keri Ann Hayes			Date of Disburs	
Mailing Address 209 Pennsylvania Ave SE				12 2013
Maining Address 2001 emisylvania Ave of			0.	.20.0
City	State Zip Code		Transaction II	D : 30809.E2623
Washington	DC 20003-1107		Transaction i	D . 30003.E2023
Purpose of Disbursement PAC Salary & Benefits				5
Candidate Name			Amount of Each	n Disbursement this Period
		Category/ Type		12167.82
Office Sought: House Disburse	ment For:		[MEMO ITEM]	
Senate	Primary General		MEMO: PAC SA	LARY & BENEFITS
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional).		·····	7	12897.89
TOTAL This Period (last page this line number only)	·····		

S ľ

S	SCHEDULE B (FEC Form 3X) FOR LINE NO.			NUMBER: PAGE 15 OF 20					20					
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the)	(check only one)									
			Summary Page		×	21b	22		23		24	25		26
						27	28a		28b		28c	29		30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the nam													3
\setminus	NAME OF COMMITTEE (In Full)													
$ \rangle$	Rely on Your Beliefs Fund													
	Full Name (Last, First, Middle Initial)													
Α.	Verizon Wireless						Date o	_	sburse			Y	V	
	Mailing Address PO Box 19769						07		2	- 1		2013		
	City	State	Zip Code				Tron		ian ID	. 20	900 F2	642		
	Irvine	CA	92623-9769				iran	sact	ion iD	: 30	809.E26	543		
	Purpose of Disbursement PAC Telephone			Г			Amour	nt of	Each	Dist	ourseme	ent this	Perio	od
	Candidate Name			С	ategor	y/						16	2.95	П
	Office Sought: House Disbursen	aant Fari			Туре			-	7		7			
		Primary	General				PAC T	ELEI	PHON	E				
		Other (spe	cify) ▼											
_	State: District:													
D	Full Name (Last, First, Middle Initial)						Doto	٠	aba					
Ь.	Visa						Date of					Y		
	Mailing Address PO Box 4512						07	/	1	2		2013	Y	
		State IL	Zip Code				Tran	sact	ion ID	: 30)809.E20	 611		
	Carol Stream Purpose of Disbursement	IL	60197-4512											
	See Below						Amour	nt of	Each	Dist	ourseme	nt this	Perio	od
	Candidate Name			C	ategor Type	ry/		Τ			-	745	8.50	
	Office Sought: House Disbursen	nent For:	I		- , ,									
		Primary	General				SEE B	ELO	W					
	President State: District:	Other (spe	cify) 🔻											
_														
C.	Full Name (Last, First, Middle Initial) Williamsburg Inn						Date of	of Di	sburse	mer	nt			
							M = N	1 /	D	D	/ Y	Y	Y	
	Mailing Address 136 E Francis St						07	4	1.	2	L.	2013	_	
	•	State	Zip Code				Tran	sact	ion ID	: 30	809.E2	613		
	Williamsburg Purpose of Disbursement	VA	23185-4271											
	PAC Lodging						Amour	nt of	Each	Dick	ourseme	ant thic	Porio	od
	Candidate Name			C	ategor	ry/	Amour	. 01	Lacii	Disk	Jurgerne		8.00	
	Office Sought: House Disbursen	nent For			Type		F1.455.1	. :=	7	_	- 7			
		Primary	General				[MEMO		-	GIN	IG			
	President	Other (spe	cify) 🔻					, \	5 202	Ciiv				
	State: District:													
s	UBTOTAL of Disbursements This Page (optional)					•		Ξ	,		,	762 ⁻	1.45	
Т	OTAL This Period (last page this line number only)					•		I	,					

SCHEDULE B (FEC Form 3X)	Llas assayata asbadula(a)	FOR LINE		PAGE 16 OF 20
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	′	04 🗔 05 🖂 00
	Detailed Summary Page	X 21b 27		24 25 26 28c 29 30b
Any information popiled from such Danage and Chalen				
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
Rely on Your Beliefs Fund				
_				
Full Name (Last, First, Middle Initial)				
A. Williamsburg Colonial Houses			Date of Disbursement	
Mailing Address PO Box 1776			07 12	2013
Maining Address TO Box 1770			07 12	2010
City	state Zip Code		Transaction ID - 200	100 F0044
· · · · · · · · · · · · · · · · · · ·	VA 23187-1776		Transaction ID: 308	609.E2614
Purpose of Disbursement PAC Lodging				
Candidate Name			Amount of Each Disb	ursement this Period
Candidate Name		Category/ Type		441.80
Office Sought: House Disburser	nent For:	Туре	[MEMO ITEM]	,
	Primary General		MEMO: PAC LODGING	3
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
3. Senate Dining Room			Date of Disbursement	
Moiling Address 11.0.0 % 1.0.11			07 12	2012
Mailing Address U.S. Capitol Building			07 12	2013
City	State Zip Code		Transaction ID : 200	200 E264E
11409.0	DC 20001-		Transaction ID: 308	309.E2615
Purpose of Disbursement PAC Meeting Expense				
Candidate Name			Amount of Each Disb	ursement this Period
Candidate Name		Category/ Type		30.50
Office Sought: House Disbursem	nent For:	Турс	[MEMO ITEM]	
	Primary General		MEMO: PAC MEETING	3 EXPENSE
President	Other (specify) ▼			<i>2</i> = <i>x</i> =
State: District:				
Full Name (Last, First, Middle Initial)				
5. Jack Lucky Floral Design			Date of Disbursement	
Mailing Address 4932 Eisenhower Ave			07 12	2013
Mailing Address 4932 Elselliower Ave			07 12	2010
City	state Zip Code		Transaction ID: 308	200 E2616
	VA 22304-4809		Transaction ib . 300	009.E2010
Purpose of Disbursement PAC Event Supplies				
Candidate Name			Amount of Each Disb	ursement this Period
Carradate Harrie		Category/ Type		225.00
Office Sought: House Disbursem	nent For:	.764	[MEMO ITEM]	, , , ,
Senate	Primary General		MEMO: PAC EVENT S	UPPLIES
President	Other (specify) ▼			
State: District:				
				0.00
SUBTOTAL of Disbursements This Page (optional)		·····•		0.00

S ľ

SCHEDULE B (FEC Form 3X)			OR LINE NUMBER: PAGE 17 OF 20				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)					
	Detailed Summary Page	X 21b	22 23	24 25 26 30b			
Г			28a 28b				
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
Rely on Your Beliefs Fund							
Full Name (Last, First, Middle Initial)							
A. UPS			Date of Disburs				
Mailing Address PO Box 72470244				12 2013			
City	State Zip Code		Transaction II	D : 30809.E2617			
Philadelphia	PA 19170-0001		Transaction is) . 30009.E2017			
Purpose of Disbursement PAC Shipping			Amount of Each	Disbursement this Period			
Candidate Name		Category/		41.44			
Office Sought: House Disburse	ment For:	Type					
Office Sought: House Disburse Senate	Primary General		[MEMO ITEM] MEMO: PAC SH	IDDING			
President	Other (specify)		MEMO. PAC SH	IPPING			
State: District:	, , , , , , , , , , , , , , , , , , ,						
Full Name (Last, First, Middle Initial)							
B. Rush Imprint			Date of Disburs	ement			
				D / Y Y Y Y Y			
Mailing Address 167 Dexter Dr			07	12 2013			
City	State Zip Code		Transaction II	D : 30809.E2618			
Monroeville Purpose of Disbursement	PA 15146-1034						
PAC Printing			Amount of Each	Disbursement this Period			
Candidate Name		Category/		4506.70			
		Type	,	1586.70			
	ment For:		[MEMO ITEM]				
Senate President	Primary General Other (specify) ▼		MEMO: PAC PR	INTING			
State: District:	Cirior (appearly)						
Full Name (Last, First, Middle Initial)							
C. AT&T			Date of Disburs	ement			
Mallian Address DOD 2000				D / Y Y Y Y			
Mailing Address PO Box 6463			07	12 2013			
City	State Zip Code		Transaction II	D : 30809.E2619			
Carol Stream	IL 60197-6463		Transaction it	J: 30609.E2619			
Purpose of Disbursement PAC Telephone							
Candidate Name			Amount of Each	Disbursement this Period			
		Category/ Type		100.36			
Office Sought: House Disburse	ment For:	71	[MEMO ITEM]	7			
Senate	Primary General		MEMO: PAC TEI	LEPHONE			
President	Other (specify) ▼						
State: District:							
CURTOTAL of Dicharasananta This Board (asting the				0.00			
SUBTOTAL of Disbursements This Page (optional).		·····•		3.55			
TOTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only X 21b 27	-
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		l by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Rely on Your Beliefs Fund			
Full Name (Last, First, Middle Initial) Nhite Elephant			Date of Disbursement
Mailing Address PO Box 2580			07 12 2013
Nantucket	State Zip Code MA 02584-2580		Transaction ID: 30809.E2620
Purpose of Disbursement PAC Event Facility and Lodging Fee	1		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2550.00
	nent For: Primary General Other (specify)		[MEMO ITEM] MEMO: PAC EVENT FACILITY AND LODGING
Full Name (Last, First, Middle Initial) 3. Dean & Deluca Mailing Address 2526 E 36th Cir N			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zip Code KS 67219-2300		Transaction ID : 30809.E2621
Purpose of Disbursement PAC Event Catering	07213-2300		Amount of Each Disbursement this Period
Candidate Name		Category/ Type	427.37
	nent For: Primary General Other (specify)		[MEMO ITEM] MEMO: PAC EVENT CATERING
Full Name (Last, First, Middle Initial) Dan Williams			Date of Disbursement
Mailing Address 209 Pennsylvania Ave SE			07 24 2013
Washington	State Zip Code DC 20003-1107		Transaction ID : 30809.E2629
Purpose of Disbursement PAC Rent & Phones Candidate Name		Category/ Type	Amount of Each Disbursement this Period 474.36
	nent For: Primary General Other (specify) ▼		PAC RENT & PHONES
SUBTOTAL of Disbursements This Page (optional)			474.36
TOTAL This Period (last page this line number only)			25459.88

SCHEDULE B (FEC Form 3X)		FOR LINE N	NE NUMBER: PAGE 19 OF 20					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only						
	for each category of the Detailed Summary Page	21b	22 🗶 23 🔲 24 🔲 25 🔲 26					
	, ,	27	28a 28b 28c 29 30b					
Any information copied from such Reports and Stater or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
Rely on Your Beliefs Fund								
Full Name (Last, First, Middle Initial)								
A. Enzi for US Senate			Date of Disbursement					
Mailing Address PO Box 2775			07 18 2013					
•	State Zip Code		Transaction ID : 30809.E2626					
Cody	WY 82414-2775		Transaction is : 00000.22020					
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period					
Candidate Name		Category/	5000.00					
MICHAEL B ENZI Office Sought: House Disburser	nent Ferri 2044	Туре						
Senate President	nent For: 2014 Primary General Other (specify)		CONTRIBUTION					
State: WY District: 00								
Full Name (Last, First, Middle Initial)			Date of Dishara wash					
B. Enzi for US Senate			Date of Disbursement					
Mailing Address PO Box 2775			07 18 2013					
City S	State Zip Code WY 82414-2775		Transaction ID : 30809.E2625					
Purpose of Disbursement CONTRIBUTION			Amount of Each Disbursement this Period					
Candidate Name		Category/	5000.00					
MICHAEL B ENZI		Type	3000.00					
X Senate	nent For: 2014 Primary General Other (specify)		CONTRIBUTION					
Full Name (Last, First, Middle Initial)								
C. Billy Long for Congress			Date of Disbursement					
			M M / D D / Y Y Y Y					
Mailing Address 1675 E Seminole St Ste F			07 24 2013					
•	State Zip Code		Transaction ID : 30910.E2668					
Springfield Purpose of Disbursement CONTRIBUTION	MO 65804-2454							
Candidate Name			Amount of Each Disbursement this Period					
BILLY LONG		Category/ Type	5000.00					
	nent For: 2014	Турс						
Senate President State: MO District: 07	Primary General Other (specify) ▼		CONTRIBUTION					
· ·								
SUBTOTAL of Disbursements This Page (optional)		·····•	15000.00					
TOTAL This Period (last page this line number only)		·····•						

for each category of the Detailed Summary Page 21b 22 28a 24 25 26c 29 30	SCHEDULE B (FEC Form 3X)	Lien concrete cohodula/a\	FOR LINE NUMBER: PAG		PAGE 20 OF 20
Detailed Summary Page 27 28 28 28 28 28 28 28 28 30 30 30 30 30 30 30 30 30 30 30 30 30	ITEMIZED DISBURSEMENTS		(check only one)		24 25 26
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Rely on Your Belliefs Fund Full Name (Last, First, Middle Initial) A. Team Graham Mailing Address PO Box 1801 City State LINDSEY GRAHAM Office Sought: President State: SC Disbursement Contribution Contributions from such committee. Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Contribution Contributions Contribution Contribution Contributions Contributions Contribut					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMINITEE (in Full) Refly on Your Beliefs Fund Full Name (Last, First, Middle Initial) Team Graham Mailing Address PO Box 1801 City State Zp Code Columbia SC 25202-1801 Contribution Candidate Name LINDSEY GRAHAM Colleg Sought: House President State: SC District: 00 Full Name (Last, First, Middle Initial) Amount of Each Disbursement (Contributions from such committee) Contribution (Contributions from such committee) Transaction ID : 30809.E2624 Amount of Each Disbursement this Period Contributions from such committee. Columbia SC 25202-1801 Transaction ID : 30809.E2624 Amount of Each Disbursement this Period Contributions from such committee. Contributions from such committee in the period of Disbursement (Initial) Columbia SC 25202-1801 Transaction ID : 30809.E2624 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Senate Primary General Primary General Category/ Type Office Sought: House Senate Primary General Category/ Type Office Sought: House Senate Primary General Category/ Type Office Sought: House Senate Primary General Category/ Type State: Districts This Page (optional)	Any information copied from such Reports and Statem	nents may not be sold or use	ed by any perso		e of soliciting contributions
Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period City State Zip Code Columbia SC 29202-1801 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Catagory' Full Name (Last, First, Middle Initial) State: District Full Name (Last, First, Middle Initial) State: District City State Zip Code Constraint of Each Disbursement this Period Catagory' Transaction ID : 30809.E2624 Amount of Each Disbursement this Period Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution Catagory' Type Contribution Contr					
Full Name (Last, First, Middle Initial) A Team Graham Mailing Address PO Box 1801 City State Zip Code SC 29202+1801 Purpose of Disbursement CONTRIBUTION Caldegory Type Condidate Name LINDSEY GRAHAM Diffice Sought: House President Other (specify) ▼ State Zip Code Purpose of Disbursement this Period Contribution Category Type Contribution Contribution Contribution Contribution Contribution Contribution Date of Disbursement this Period Contribution Contribution Category Type Contribution Date of Disbursement this Period Contribution Category Type Contribution Date of Disbursement Category Type Candidate Name Category Type Category Type Category Type Catego					
A Team Graham Mailing Address PO Box 1801 City State Zip Code SC 29202-1801 Purpose of Disbursement Contribution State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Contribution Category/ Type Condidate Name Category/ Type Contribution Category/ Type Category/ Type Contribution Category/ Type Contribution Category/ Type Contribution Category/ Type Contribution Contrib	Rely on Your Beliefs Fund				
Mailing Address PO Box 1801 City	Full Name (Last, First, Middle Initial)				
Mailing Address PO Box 1801 City State Zip Code SC 25202-1801 Transaction ID : 30809,E824 Amount of Each Disbursement this Period Condidate Name LINDSEY GRAHAM Office Sought: House President State: SC District: City State Zip Code Primary General Other (specily) Transaction ID : 30809,E824 Amount of Each Disbursement this Period Contribution Contribution Contribution Contribution Date of Disbursement Category/ Type Office Sought: House Primary General Office Sought: President State: District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Category/ Office Sought: House Disbursement For: Senate Primary General Other (specily) ▼ Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Category/ Type Date of Disbursement this Period Category/ Type	A. Team Graham			Date of Disbu	rsement
City Columbia SC 29202-1801 Purpose of Disbursement CONTRIBUTION Candidate Name City State Zip Code Purpose of Disbursement For: 2014 President President Other (specify) ▼ State: SC District: 00 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Contribution Category/ Type Contribution Contribution Contribution Contribution Contribution Contribution Contribution Category/ Type Contribution Category/ Type Category/ Type Category/ Type Category/ Ty	Mailing Address DO Day 1991				
Columbia SC 29202-1801 Purpose of Disbursement Contribution Candidate Name LINDSEY GRAHAM Office Sought: House Senate Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House President State: Disbursement For: 2014 Amount of Each Disbursement Category/ Type Office Sought: House President State Category/ Type Office Sought: House President Other (specify) ▼ Date of Disbursement this Period Category/ Type Office Sought: District: Other (specify) ▼ Date of Disbursement this Period Category/ Type Office Sought: House President Other (specify) ▼ Date of Disbursement this Period Amount of Each Disbursement Category/ Type Office Sought: Primary General Other (specify) ▼ Office Sought: Disbursement Candidate Name City State Zip Code Purpose of Disbursement Category/ Type Office Sought: Primary General Other (specify) ▼ State Zip Code Purpose of Disbursement Category/ Type Office Sought: Primary General Other (specify) ▼ Subtotal of Disbursement this Period Category/ Type Office Sought: Primary General Other (specify) ▼ Subtotal of Disbursement this Period Category/ Type Office Sought: Primary General Other (specify) ▼ Subtotal of Disbursement this Period	Mailing Address PO Box 1801			07	18 2013
Countries Purpose of Disbursement City State Candidate Name City State Candidate Name City State Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Condidate Name Category/ Type City State City Category/ Type Category/ Type Category/ Type Category/ Type City State City	City	State Zip Code		Transaction	ID : 20000 E2624
CONTRIBUTION Candidate Name LINDSEY GRAHAM Office Sought: House Primary General Primary General Prosident Other (specify) ▼ Mailing Address Primary General Prosident Other (specify) ▼ Amount of Each Disbursement this Period Contribution Category/ Type Contribution Category/ Type Contribution Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/		SC 29202-1801		Transaction	ID : 30009.E2024
Candidate Name LINDSEY GRAHAM Office Sought: House Senate President Prisident Other (specify) CONTRIBUTION Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: Senate President Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: Senate Primary General Other (specify) Amount of Each Disbursement this Period Category/ Type Category/ Type Office Sought: Senate Primary General Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: Senate Primary General Other (specify) Amount of Each Disbursement this Period Category/ Type Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: House Disbursement For: Gategory/ Type Office Sought: Disbursement Disbursement For: Senate Primary General Other (specify) Senate President Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement Disbursement For: Senate Primary General Disbursement For: Senate Primary General Disbursement Disbursement For: Senate Primary General Disbursement Disburseme				Amount of Fac	ch Disbursement this Period
Office Sought: House President President State: SC District: 00 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Primary General Other (specify) ▼ Office Sought: House Disbursement For: 2014 President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Other (specify) ▼ Date of Disbursement this Period Amount of Each Disbursement this Period Other (specify) ▼ Amount of Each Disbursement this Period Other (specify) ▼ Other (specify) ▼ State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: General President Disbursement this Period Office Sought: House Disbursement For: General President Disbursement This Period Office Sought: House Disbursement For: General Primary General Disbursement This Period Office Sought: House Disbursement For: Senate President	Candidate Name		Category/	51 Lu	
Senate President Other (specify) State: SC District: 00 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement this Period Category/ Type Office Sought: Other (specify) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House President Category/ Type Office Sought: Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: Other (specify) State: District: Other (specify) Subtotal of Disbursements This Page (optional)					5000.00
State: SC District: 00 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President President District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type					
State: SC District: 00 Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement this Period Type Office Sought: Other (specify) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Office Sought: House Senate Primary General Other (specify) State: District: State: Disbursement For: Senate Primary General Other (specify) State: Disbursement This Page (optional)		-		CONTRIBUTIO	DN
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Prisinary General President State: District: Mailing Address City State Zip Code Purpose of Disbursement this Period Category/ Type Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Category/ Type Office Sought: House Senate Primary General Candidate Name Candidate Name Office Sought: House Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Fresident State: District: Substitute District: 5000.00		outer (specify)			
City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement this Period Category/ Type Office Sought: House Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Candidate Name Category/ Type Office Sought: House Primary General Primary General Other (specify) ▼ State: District: Substitute Primary General Primary General Other (specify) ▼ State: District: Substitute District: 5000.00	Full Name (Last, First, Middle Initial)				
City State Zip Code Purpose of Disbursement Candidate Name City Senate Primary General Other (specify) ▼ City State Zip Code Purpose of Disbursement Tor: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substrate: District: District: Senate Primary General Other (specify) ▼ State: District: State	В.			Date of Disbu	rsement
City State Zip Code Purpose of Disbursement Candidate Name Category' Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category' Type Office Sought: House Primary General Other (specify) ▼ Amount of Each Disbursement Amount of Each Disbursement Category' Type Office Sought: House Primary General Other (specify) ▼ State: District: Substitute: District: Senate Primary General Other (specify) ▼ Substitute: District: Soundary General Other (specify) ▼	Mailian Address			M = M / E) D / Y Y Y Y
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Category/ Type Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: State: Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitute Disbursements This Page (optional)	Mailing Address				
Candidate Name Category/ Type Office Sought: House	City	State Zip Code			
Candidate Name Category/ Type Office Sought: House	Purpose of Dishursement				
Office Sought: House Senate Primary General Other (specify) Type State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type State: District: State: District:	i dipose of Disbursement			Amount of Ea	ch Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Suppose of Disbursement For: Senate Primary General Other (specify) State: District:	Candidate Name		Category/		
Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)					
State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substoctable President State: District: Substoctable President State: District: 5000.00					
State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Primary General Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)					
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Subtrotal of Disbursements This Page (optional)		· · · · · · · · · · · · · · · · · · ·			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Substrotal of Disbursements This Page (optional)				_	
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	C.				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substoctal Of Disbursements This Page (optional)	Mailing Address			M M / E) D / Y Y Y Y
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substruct: For: State: Disbursements This Page (optional)					
Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substruct: District: Substruct: For: Senate Primary General Other (specify) ▼ Substruct: For: Senate Primary General Other (specify) ▼ Substruct: For: Senate Primary General Other (specify) ▼	City	State Zip Code			
Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substitute Substitute State Substitute Substitute State Substitute	Purpose of Disbursement				
Office Sought: House Senate Primary General Other (specify) State: District: Substitute State: Disbursements This Page (optional)	·			Amount of Ea	ch Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Candidate Name				
Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	Office Sought: House Disburger	aont For:	Туре	-	
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)					
State: District: SUBTOTAL of Disbursements This Page (optional)		,			
2000 CO	State: District:				
2000 CO					5000 00
TOTAL This Period (last page this line number only)	SUBTOTAL of Disbursements This Page (optional)		·····•		3000.00
	TOTAL This Period (last page this line number only)				20000.00